PTO/SB/06 (07-06)

Approved for use through 1/31/2007, OMB 0651-0032 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/698,555			ing Date 31/2003	To be Mailed
APPLICATION AS FILED — PART I OTHER THAN (Column 1) (Column 2) SMALL ENTITY □ OR SMALL ENTITY											
	FOR	N	NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
×	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A		N/A		1	N/A	770
	SEARCH FEE (37 CFR 1.16(k), (i),	or (m))	N/A		N/A		N/A		l	N/A	
	EXAMINATION FE (37 CFR 1.16(a), (p),	E or (q))	N/A		N/A		N/A		ı	N/A	
	TAL CLAIMS CFR 1.16(i))		minus 20 =		•		x \$ =		OR	x s =	
	EPENDENT CLAIM CFR 1.16(h))	S	minus 3 =			1	x \$ =			x \$ =	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	ts of pap 50 (\$125 ional 50 s	ings exceed 100 tion size fee due y) for each ion thereof. See 7 CFR 1.16(s).							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))									ı		
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL			TOTAL	770
APPLICATION AS AMENDED – PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY											
AMENDMENT	07/07/2008	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16())	• 20	Minus	+ 25	= 0		x \$ =		OR	X \$50=	0
	Independent (37 CFR 1.16(h))	• 2	Minus	 3	= 0		x \$ =		OR	X \$210=	0
	Application Size Fee (37 CFR 1.16(s))										
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					l			OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
(Column 1) (Column 2) (Column 3)											
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,16(i))		Minus		=		x \$ =		OR	x \$ =	
ΜO	Independent (37 CFR 1,16(h))		Minus	***	-]	x \$ =		OR	x \$ =	
핇	Application Size Fee (37 CFR 1.16(s))					l			l		
ΑN	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))						TOTAL		OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR .	TOTAL ADD'L FEE	
"If the entry column is less than the entry in column 2, white "v in column 3. "If the "Highest Number Previously Paid for "In THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For "In THIS SPACE is less than 30, enter "30". "If the "Highest Number Previously Paid For "In THIS SPACE is less than 30, enter "30". "If the "Highest Number Previously Paid For "In THIS SPACE is less than 30, enter "30". "If the "Highest Number Previously Paid For "In THIS SPACE is less than 30, enter "30". "If the "Highest Number Previously Paid For "In THIS SPACE is less than 30, enter "30". "If the "Highest Number Previously Paid For "In THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For "In THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For "In THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For "In THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For "In THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For "In THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For "In THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For "In THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For "In THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For "In THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For "In THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For "In THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For "In THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For "In THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For "In THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For "In THIS SPACE is less than 20, enter "20". "If the											

This collection of information is required by 37 CFR 1.6. The information is required to obtain or retain a benefit by the public within it is life (and by the USPTO to process) an application. Confidentiality is overwed by 80 US of .22 and 37 CFR 1.4. This collection is estimated to the 12 minutes to complete, including pathening, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burdon, should be sont to the Child information Officer. U.S. Patent and Transf. Office. U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.